

## **EXHIBIT D**

## **Exhibit D**

### **Phase IIa STUDIES OF CHLORO-DICA**

#### **Study A**

##### **Description**

This was a double-blind placebo-controlled isoglycemic clamp study in individuals with impaired glucose tolerance.

The study comprises 12 individuals who were treated in a cross-over design for 3 weeks with one capsule of 200 mg of Cl-DICA (also referred to as BM 17.0249, being the compound 2,2,13,13-tetrachloro-tetradecane-1,14 dioic acid) or placebo daily (first 3 days 3x1 capsule as loading dose).

##### **Results**

Triglyceride plasma concentrations of patients treated with Cl-DICA or placebo are shown in Figure 1. There was no significant difference between treated and placebo subjects.

Cholesterol plasma concentrations of patients treated with Cl-DICA or placebo are shown in Figure 2. There was no significant difference between treated and placebo subjects.

There was no significant difference to placebo for insulin sensitivity parameters.

In conclusion, no effect of Cl-DICA could be demonstrated in this study compared to placebo.

## **Study B**

### **Description**

This was a double-blind placebo-controlled multicenter study in individuals with type 2 diabetes.

Patients were treated for 4 weeks with a daily dosage 200 mg of Cl-DICA (BM 17.0249) or placebo (first 5 days 2x1 capsule as loading dose).

The primary efficacy variable was defined as AUC of glucose during glucose tolerance test. Secondary variables included, *inter alia*, lipids. In terms of safety, adverse events and laboratory parameters were recorded. 112 patients completed the study (Cl-DICA: 59; placebo: 53), 88 were evaluable for protocol (Cl-DICA: 49; placebo: 39).

### **Results**

- A scheme of the basic characteristics of this study is shown in Figures 3A and 3B.
- Characterization of patients is shown in Figure 4
- Triglycerides plasma levels are shown in Figure 5.

In summary, there was no significant difference to placebo for insulin sensitivity parameters, neither for the other metabolic parameters, including lipids. In conclusion, no effect of Cl-DICA could be demonstrated in this study on triglycerides and cholesterol plasma levels compared to placebo.

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Figure 1

Triglyceride concentration (mmol/l) after 3 weeks of treatment  
with BM 17.0249 or Placebo (200 mg per day)

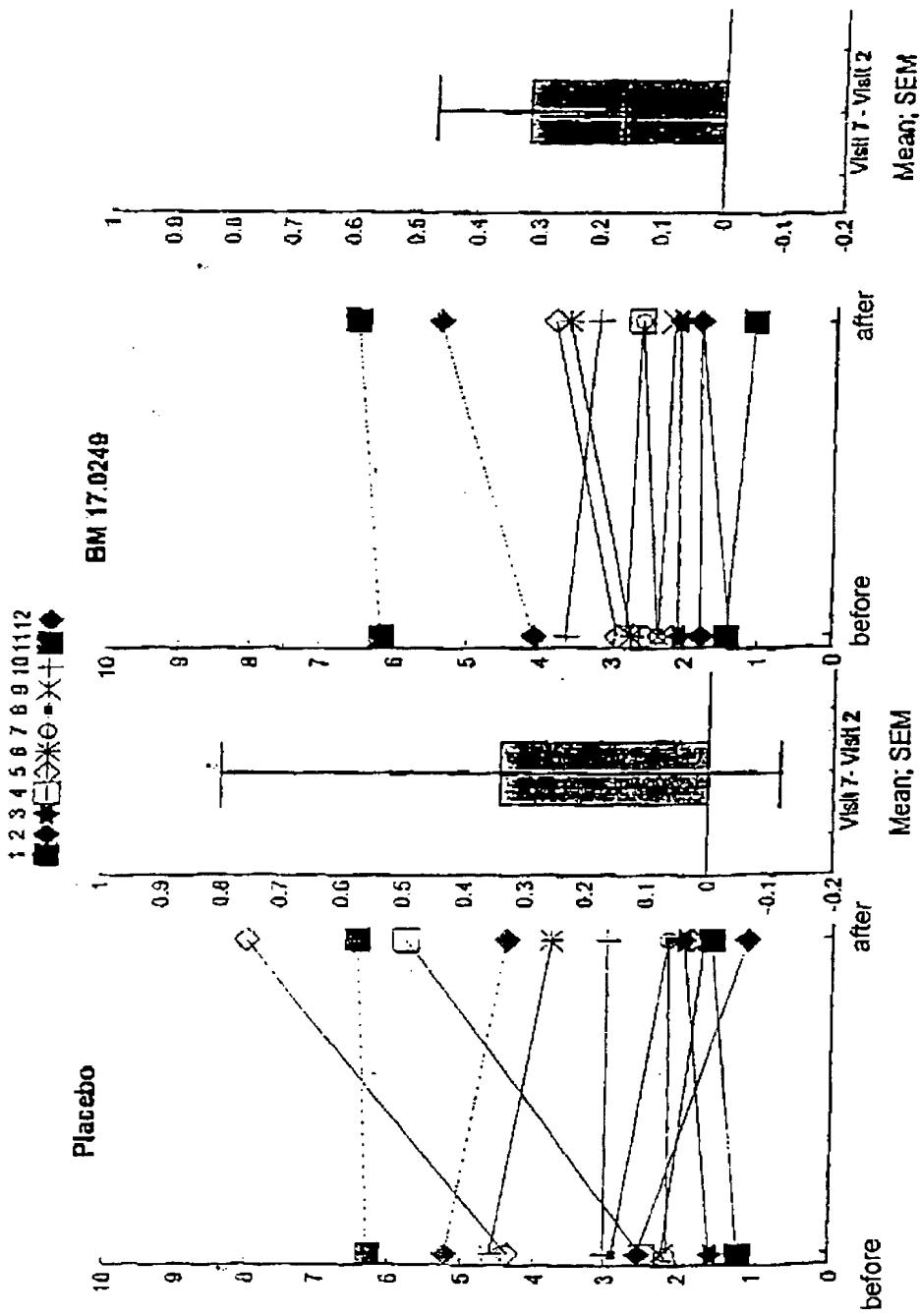


Figure 2

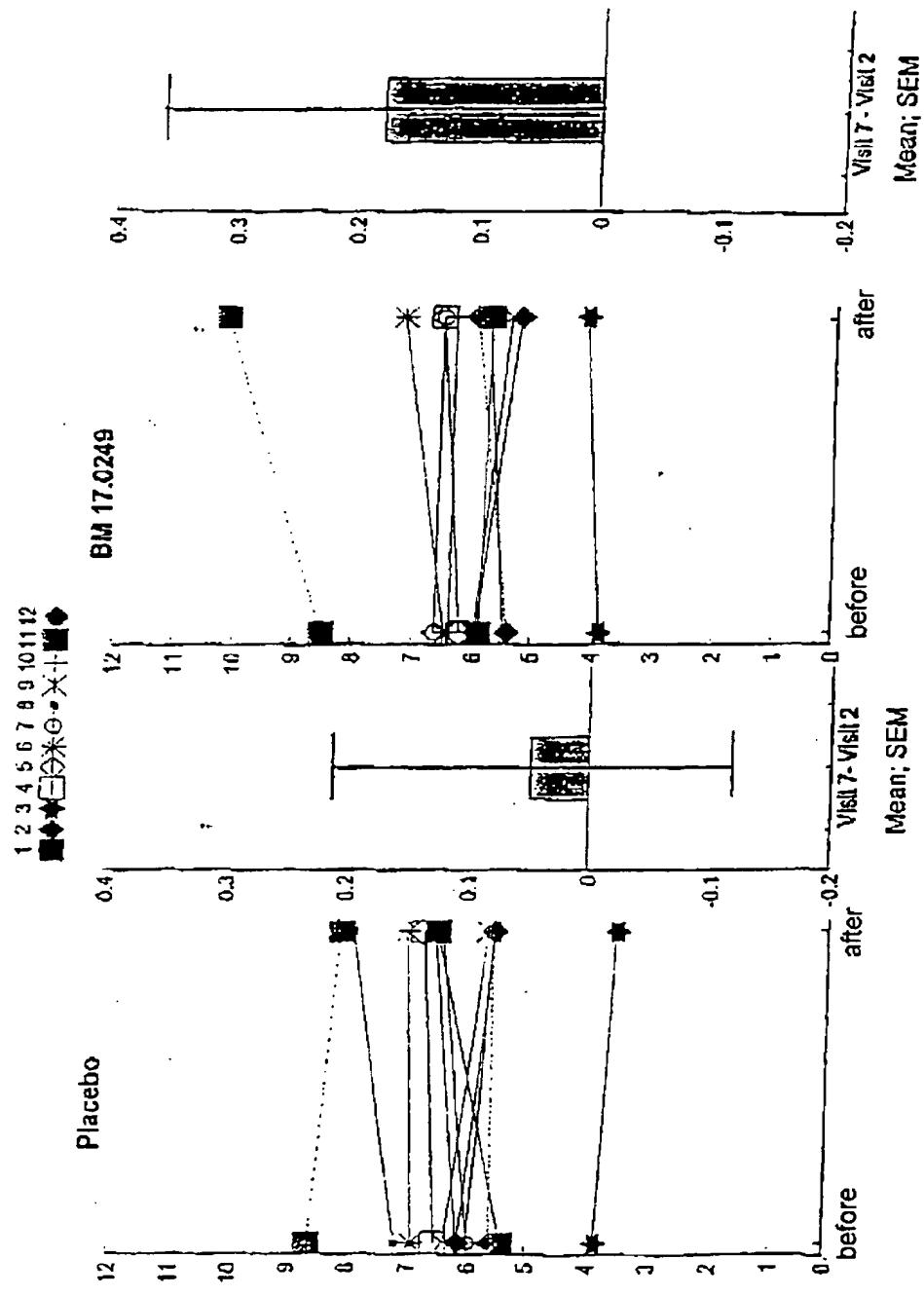
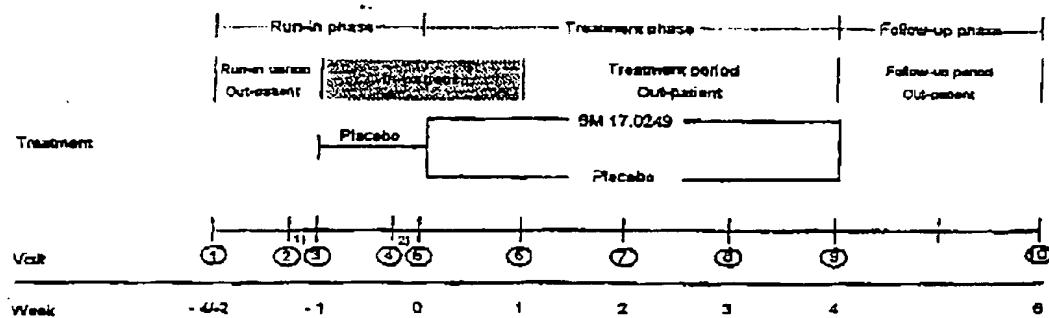


Figure 3A

**Study B**

**Objective:** Proof of antidiabetic action and safety of BM 17.0249 in NIDDM patients

**Trial design:**



**Variables:**

- AUC Glucose after oral glucose load
- Insulin
- Lipids
- Fibrinogen
- Safety  
(AEs and laboratory parameters)

Figure 3B

**Study B**

Study duration: About 7 weeks

No. of centers: 12 (Central and Eastern Europe)

No. of patients:

	enrolled	randomized	completed	evaluable (per protocol)
Total	135	115	112	88
BM 17.0249		60	59	49
Placebo		55	53	39

Figure 4

**Study B**

**MF 4366**

**Characterisation of patients -  
Baseline (V4/V5) - values (medians)**

	<b>BM 17.0249 n = 49</b>	<b>Placebo n = 39</b>
Fasting blood glucose [mg/dl]	150	154
Triglycerides [mg/dl]	174	184
BMI [kg/m <sup>2</sup> ]	30	30

Figure 5

